plication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

5017D 3

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			F					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	·710.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		• Ø			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ min	us 3 =				X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT					,			+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	ļ	TOTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART II								1			OTHER	THAN
		(Column 1)				(Column 3)	_	SMALL ENTITY			SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. M	Minus	يمر ۵۰۰	1	= 0		X\$ 9=		OR	X\$18=	
AME	Independent	•]	Minus	***		= 0		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEP	ENDEN	I CLAIM			+135=		OR	+270=	
										ا	TOTAL	
		(Column 1)		(Calı	ımn 2)	(Column 3)		ADDIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	'	OR	X\$18=	
	Independent	*	Minus	***	IT OL A184	=	┨	X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	II CLAIM		_	+135=		OR	+270=	
	•							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	umn 2)_	(Column 3	<u>)</u>					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NU PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDE	NT CLAIN	<i>A</i>				1	+270=	
	If the entry in cal-	ımn 1 ic lace than	the entry in colu	ımn 2 wi	rite "0" in c	olumn 3		+135=		OR		
••	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											